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Results of The NCI Survey of OSHA's NEW DIRECTIONS GRANTEES

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Results of the NCI Survey of OSHA's NEW DIRECTIONS GRANTEES

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Statement of Purpose

The Occupational Safety and Health Administration currently funds projects with nonprofit labor, business, and educational institutions working towards institutional competency in dealing with the health and safety concerns of workers. These "New Directions" projects are carried out by some 150 grantees nationwide. The National Cancer Institute provides a limited amount of technical assistance to the New Directions Program in the form of expertise on cancer information and education programs.

To help the grantees describe more exactly the areas in which they need help with regard to cancer information and education, a mail survey was conducted among 80 of the grantees (those which had contracts as of April 1980). The purpose of this survey was to:

1) Discover how grantees use and perceive the utility of NCI cancer information and smoking programs.

2) Help determine priority concerns which can be addressed by NCI resources.

3) Promote communication between grantees and NCI.

4) Provide data useful in designing and promoting the use of education materials for the grantees addressing cancer risks in the workplace.

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Executive Summary

Eighty percent (64) of 80 New Directions grantees surveyed in April 1980 responded to a 10 item mail questionnaire. Considering the grantee projects in progress and those planned, useful assistance could be provided to about two-thirds of the survey respondents by concentrating NCI support of the program in two specific action areas: (1) General Information/Education, and (2) Training, including awareness, information, and control aspects. An even greater percentage (85.1 per cent) of grantees would be served by including assistance in the areas of workshops and recognition of carcinogens.

Cancer topics of particular interest to at least 80 percent of the respondents are: (1) how cancer may be caused in the workplace, (2) how to identify cancer-causing substances in the workplace, and (3) what to tell a physician about occupational exposures.

The responding grantees have obtained useful information most often from available NCI printed materials, the Cancer Information Clearinghouse (CIC), and toll-free cancer information services. Nevertheless, nearly 60 percent of those responding have not used the Cancer Information Clearinghouse and 70 to 90 percent have used no more than one or two of the other readily available NCI programs and services, reflecting unfamiliarity with the available information system products or with the necessary procedures for obtaining them, or a lack of need for the information. The use of NIOSH and OSHA information services by 61 percent of the responding grantees confirms that relevant and useful information is also available through those offices.

A very wide range of grantee-indicated topics of special interest suggests the need for grantee reference to comprehensive indexes or

directors of cancer information resources and underscores the need for the resource directory currently under development by the Office of Cancer Communications.

Grantee perceptions of their own needs for teaching people about cancer are generally consistent with currently ongoing and planned grantee activities. However, specific grantee suggestions for assistance indicate grantee interests and perceived information needs also exist in other areas such as cancer prevention and detection.

The following recommendations were made:

(1) Concentrate NCI support to New Directions grantees in several limited areas relating most directly to their present and planned activities;

2) Encourage greater use of NCI programs and services through the preparation and distribution to grantees of complete information packages on the scope and use of existing NCI programs and services;

3) Identify and made available to grantees world-wide comprehensive indexes or directories of cancer information resources, and

4) After completion of the above recommendations, update the continuing resource requirements of all New Directions grantees by the implementation of a second short information needs survey.

Interpretation of Results

The grantees' responses to questions on what, if any, activities they currently plan or conduct revealed interests pertinent to all aspects of occupational cancer hazards. Answers ranged from programs on toxicology and epidemiological research to medical screening and monitoring of the worksite. The most frequently cited types of programs were:

- general cancer information/education.
- training in awareness and control of cancer-causing hazards.

Since the topics listed on page six are not mutually exclusive, they represent the diversity of related programs underway. The responses were recorded, where possible, in the verbatim words of the grantee. More lengthy descriptions were paraphrased to a one word or short phrase pertaining to a similar term.

Question 3 asked respondents to rate the most frequently discussed topics on occupational cancer. Most often cited was "How cancer may be caused in the work-place." Fifty-four respondents (89 per cent) rated this item first in importance; six (9 per cent) rated it second. The statement relating to the identification of cancer-causing substances in the workplace was nearly as salient; 51 (80 percent) chose this as of primary and eight thought it was of secondary importance. The issues of the synergistic effects of possible carcinogens and the ways to tell a physician about occupational exposures also were perceived as priorities by many respondents While not cited as often, the number who chose these issues as "most important" is substantial. The topics least important to the respondents pertained to cancer treatment and re-employment problems of recovered cancer patients.

The grantees seem to use NCI resources selectively. NCI materials were used by 51 (80 percent) respondents, with the Cancer Information Service and the Cancer Information Clearinghouse mentioned by 24 (38 percent) and 26 (41 percent) grantees, respectively. Sources least cited were the comprehensive cancer centers, International Cancer Research Data Base, the bioassay program, and the Health Message Testing Service.

Even though the grantees may not use all of NCI's programs and services fully, many desire more information about the Institute's initiatives. Facts about the CIC were requested by 27 (42 percent) respondents. The bioassay program and the CIS were of interest to 17 (26 per cent) of the respondents. Few wanted to know more about comprehensive cancer centers.

Of those NCI resources which have been used by the grantees, few were perceived as unsatisfactory. Twenty-three (36 percent) liked all and only two (3 percent) liked none of the NCI's programs and services. Most frequently rated as unsatisfactory (9 percent) was the International Cancer Research Data Bank.

The grantees also said they utilize the expertise of a variety of other resources for their cancer-related projects besides those available through NCI. The resources were listed as follows:

- medical schools (hospitals)/University faculty
- government agencies
- scientific literature/seminars
- other unions/own medical staff
- voluntary agencies/International Agencies
- other agencies/associations

OSHA and NIOSH frequently were cited. Among the medical schools and universities, Mt. Sinai (New York City) was most often mentioned. Voluntary agencies such as the American Cancer Society, the American Lung Association, and in-house medical staff also were consulted.

When asked whether they would like more information about non-NCI sources of assistance, 50 (78 percent) replied "yes." Eleven (17 percent) grantees did not desire such help. The areas of interest indicated by those wanting information were various and were divided into the following categories:

- General: including knowledge about occupational hazards, screening, health assessment, technology.
- Specific: including mention of metabolic or organic disorders associated with occupational hazards.
- Categorical: including mention of specific substances on procedures which present occupational hazards.

General information on occupational diseases, including cancer, was cited by seven respondents. Among the organic and metabolic disorders related to occupational health, respiratory diseases were mentioned most frequently. Categorical interests differed widely and likely represented materials used by specific industries.

A question asking grantees whether they wanted information on how to teach their constituents about cancer elicited a very positive response. Fifty-three (83 percent) indicated a need for such assistance. Suggestions for programs included:

- Teaching dangers of asbestos and cancer.
- General occupational health risks.
- Construction and cancer-causing substances.

The respondents had very different ideas about the kind of help they wanted to aid in the achievement of their individual grant's program objectives. Some mentioned the need for more funding and technical assistance in the form of workshops. Others had quite definite opinions on how to approach occupational hazard reduction with regard to cancer. For example, one respondent stated:

> Go to construction jobs and test on job sites, not in labs. What is printed is a lot of words and does not have a lot of meaning to the average worker. Get rid of some of those long medical words that are not listed in the dictionary.

Another suggested ". . .downplaying smoking during occupational cancer training programs. Corporations seem to enjoy placing blame upon smokers rather than workplace carcinogens."

The bulk of the comments pertained to supplying resources in the form of personnel, audiovisual materials, and publications on occupational health. One grantee suggested that NCI fund grants for medical students wishing to do summer projects with unions.

Findings

1) Over 81 percent of the grantees responding to the survey plan to conduct or are conducting activities aimed at the "Prevention or Detection of Occupational Cancer." Sixteen of 80 grantees did not respond to the questionnaire. Clearly, the survey results show the broad activity area deemed of greatest interest to the respondents is the Information/Training category. Within that broad category, the two specific areas of activity identified most frequently were: (1) General Information/Education, and (2) Training (awareness, information, and control). Of secondary importance were the areas of information and training on workshops and information on recognition of carcinogens.

   (Conclusion) By concentrating support of the New Directions Program in two specific action areas (i.e., General Information/Education and Training, including awareness, information and control), NCI would be able to provide useful assistance to 68.7 percent of the indicated planned and ongoing activities of the 64 survey respondents. By including also information and training on workshops and information on recognition of carcinogens, pertinent assistance would be extended to 85.1 percent of planned and ongoing grantee activities.

2) Among the 15 occupational cancer topics listed (i.e., Question 3 of the survey), several were indicated to be of greatest interest to 50 percent or more of the respondents. These topics of interest deal with how cancer may be caused in the workplace, how to identify

cancer-causing substances in the workplace, what to tell a physician about occupational exposures, and how two or more substances can interact to greatly increase the risk of cancer.

(Conclusion) If the frequencies of topic importance ratings 1 and 2 are combined (i.e., a rating of 2 indicates relatively great importance) to assess the relative importance of the 15 listed topics, the major interests of 80 percent of the respondents would be served by centering NCI information support on the following three topics:

(1) How cancer may be caused in the workplace (100 percent)
(2) How to identify cancer-causing substances in the workplace (95 percent)
(3) What to tell a physician about occupational exposures (82 percent)

Broader interests of 67 percent of the respondents would be satisfied if information support on the following three topics were also included:

(1) How two or more substances can interact to greatly increase the risk of cancer (76 percent)
(2) What workers families should know about cancer risks (71 percent)
(3) How to identify local funding, information, and people resources (71 percent)

3) The NCI programs and services used most frequently to date by the responding grantees are:

(1) Printed materials from NCI (78 percent)
(2) Cancer Information Clearinghouse (40 percent)
(3) Toll-free cancer information services (37 percent)

The remaining four programs and services (Question 4 of the survey), were each used by only about 10 percent of the respondents.

(Conclusion) The most used NCI services (listed above) reflect the perceived needs of the grantees for information and materials. That is, the products available through these three services appear to be responsive to the stated needs of most of the planned or ongoing activities (indicated in 1 above).

4) Over 42 percent of the respondents indicated a desire to know more about the NCI Cancer Information Clearinghouse (CIC). Only 20 to 25 percent indicated an interest in each of the other six NCI programs and resources listed (Question 5 of the survey). About 36 percent of the respondents found all seven of the listed NCI programs and resources to be satisfactory, but an equal number did not respond to the question (Question 6 of the survey).

(Conclusion) Although there has been modest use of the NCI CIC system by the grantees, nearly 60 percent of those responding to the survey have not attempted to use it, and 90 percent of the respondents have not used 4 of the 7 listed programs and services at all, while nearly 70 percent have not used 6 of the 7 services. These results suggest either an unfamiliarity with the products and their utility available through these NCI resources or unfamiliarity with the necessary procedures for obtaining pertinent information or material.

5) Nearly 72 percent of the survey respondents have previously sought assistance from Government agencies other than the NCI, and 36 percent have solicited assistance through medical schools, hospitals, or university faculty members. The other Government agencies most frequently contacted for help were NIOSH (36 percent) and OSHA (25 percent). From

one to several respondents indicated utilization of each one of a variety of specific resources (~20) available through scientific literature sources, seminar results, union data, industrial medical staffs, voluntary agencies, international agencies, and other related agencies or associations.

(Conclusion) Relevant and useful information is available to the New Directions Grantees through NIOSH and OSHA as is indicated by the use of these information services by 61 percent of the responding grantees.

6) More than 78 percent of the respondents expressed a need for more information about non-NCI sources of assistance. The range of suggested areas of interest requiring assistance (based on 36 grantee responses) was very broad, encompassing 4 general areas and 20 specific/ categorical areas. The frequency of grantee interest in 17 of the 20 specific/categorical areas was one each.

(Conclusion) The side spectrum of specific topics or areas of grantee interest indicated by the survey (Question 8) precludes the possibility of direct NCI response to each specific information need and suggests grantee reference to comprehensive indexes such as the Directory of Cancer Information Resources prepared by the ICRDB. It also underscores the need for the resource directory presently under development by OCC.

7) A need for information on how to teach people about cancer was indicated by 78 percent of the survey respondents. Specific suggestions for programs (Question 9 of the survey) included only nine topics offered by 12 grantees.

(Conclusion) The suggested programs on how to teach people about cancer indicate that the question was misinterpreted to read: would you like information on what to teach people about cancer, rather than information on how to teach people about occupational cancer. In this context, the programs that were suggested are consistent with the currently planned and ongoing grantee activities in the broad categories of Prevention/Detection and Research/Clinical Programs (Question 2 of the survey).

8) Suggestions on how NCI can help the grantees to achieve their specific objective were offered by 28 respondents. These suggestions could be classified into the following groups and frequencies:

(1) Information materials for training workers - 9

(2) Specific occupational data or information - 5

(3) Guidance and support for training workers - 4

(4) Resource information - 4

(5) Information on monitoring and controls - 3

(6) Epidemiologic information - 3

(7) Information sources - 3

(8) Information materials for professionals - 2

(9) Program planning information - 2

(10) Grantee-worker communication - 1

(Conclusion) The 36 specific suggestions for grantee assistance offered by the survey respondents (Question 10) are somewhat inconsistent with the indicated planned and ongoing grantee activities as summarized under 1 above. These specific suggestions reflect at least as much

grantee interest in specific Prevention/Detection information as in general subject and training information.

RECOMMENDATIONS

1) Provide NCI support to grantees in the area of general information and education regarding occupational hazards and health.

2) Encourage greater use of NCI programs and services by preparing and sending to each grantee a complete information package on each of the seven NCI programs and services listed in the survey (Question 4), including address, points of contact (names and phone numbers), summary of services available, costs of services, limitations of services, and guidance for effective use of each resource.

3) Identify Government-wide or worldwide comprehensive indexes or directories of cancer information resources and provide to each grantee.

4) After some or all of the above recommendations have been fulfilled by NCI and/or OSHA, circulate a second questionnaire to all OSHA New Directions grantees, including the nearly 100 new recipients, to determine further resource requirements that may exist.

TABULATION OF RESULTS

Responses by Category (N=64)

Category		No. of Respondents	Percent
I	Labor Unions	20	31
II	Trade Associations	9	14
IIIa	Educational Institutions (labor related)	12	19
IIIb	Educational Institutions (other than labor)	14	22
IV	Other Non-profit Organizations	9	14
		64 = 80% response	

Question 1: Does your project conduct, or plan to conduct activities aimed at the prevention, or detection of occupation cancer?

Yes: 52 (82%) No: 12 (19%)

Question 2: If you answered "yes" to Question 1, please describe the activities below, or on an attached sheet, if necessary.

Category	No. of Responses	Percent
Information/Training		
o workshops	6	9
o general information/ education	30	47
o training (awareness, information, control)	16	25
Prevention/Detection		
o recognizing carcinogens	5	8
o prevention	1	1.5
o health hazard evaluation questionnaire	1	1.5
o screening	1	1.5
o monitoring the work-site	2	3.1
o hazard control	1	1.5
Research/Clinical Programs		
o research (toxicology, epidemiology)	2	3.1
o medical services	2	3.1

Question 3: Below are some frequently discussed topics concerning occupational cancer. Please rate them 1 (most important) through 5 (least important) by circling the appropriate number to indicate your project's interest in teaching others about them:

	Most important...least important				
	1	2	3	4	5
What is cancer	16 (25%)	14 (22%)	17 (27%)	9 (14%)	5 (8%)
How cancer is detected	16 (25%)	19 (30%)	14 (22%)	8 (13%)	5 (8%)
How cancer may be caused in the workplace	54 (84%)	6 (9%)	2 (3%)	0 (0%)	0 (0%)
How to identify cancer-causing substances in the workplace	51 (80%)	8 (13%)	0 (0%)	1 (1.5%)	1 (1.5%)
How cancer is treated	2 (3%)	13 (20%)	12 (19%)	13 (20%)	19 (30%)
The re-employment problems of the successfully treated cancer patient	4 (6%)	7 (11%)	19 (39%)	17 (27%)	14 (22%)
How animal studies help us know a substance causes cancer	5 (8%)	17 (27%)	16 (25%)	7 (11%)	15 (23%)
How two or more substances can interact to greatly increase the risk of cancer	30 (47%)	17 (27%)	8 (13%)	4 (6%)	3 (5%)
How to organize a screening program	21 (33%)	7 (11%)	12 (19%)	12 (19%)	8 (13%)
How to notify people who are at high risk	16 (25%)	20 (31%)	20 (31%)	3 (5%)	3 (5%)

Question 3: (continued)

	Most important...least important				
	1	2	3	4	5
What workers' families should know about cancer risk	20 (31%)	22 (34%)	12 (19%)	4 (6%)	1 (1.5%)
How smokers can reduce their cancer risk	9 (14%)	25 (39%)	14 (22%)	7 (11%)	3 (5%)
What to tell a physician about occupational exposures	33 (52%)	16 (25%)	6 (9%)	2 (3%)	3 (5%)
OSHA's National Cancer Policy	19 (30%)	14 (22%)	12 (19%)	3 (5%)	5 (8%)
How to identify local resources	26 (41%)	16 (25%)	10 (16%)	1 (1.5%)	4 (6%)

Question 4: Has your organization made use of any of the following National Cancer Institute programs and services:

	Yes	No	Don't Know
A Comprehensive Cancer Center (large cancer treatment and research institutions funded by NCI)	7 (11%)	52 (81%)	5 (8%)
A Cancer Information Service (public cancer information offices that can be called toll-free)	24 (38%)	34 (53%)	9 (14%)
The Cancer Information Clearinghouse (a centralized resource for educational materials and referral on many subjects relating to cancer)	26 (40%)	32 (50%)	7 (11%)
The International Cancer Research Data Base (a computerized listing of current cancer research)	6 (9%)	53 (83%)	7 (11%)
The Bioassay Program (A research program to test substances to determine whether they cause cancer)	7 (11%)	50 (78%)	7 (11%)
The Office of Cancer Communications/Health Message Testing Service (a service that pretests cancer education materials)	6 (9%)	53 (83%)	3 (5%)
Printed materials from the National Cancer Institute?	51 (80%)	13 (20%)	1 (1.5%)

Question 5: Which resources would like to know more about?

Resource	Would like more information
A Comprehensive Cancer Center (large cancer treatment and research institutions funded by NCI)	12 (19%)
A Cancer Information Service (public cancer information offices that can be called toll-free)	17 (27%)
The Cancer Information Clearinghouse (a centralized resource for educational materials and referral on many subjects relating to cancer)	27 (42%)
The International Cancer Research Data Base (a computerized listing of current cancer research)	16 (25%)
The Bioassay Program (A research program to test substances to determine whether they cause cancer)	17 (27%)
The Office of Cancer Communications/Health Message Testing Service (a service that pretests cancer education materials)	17 (27%)
Printed materials from the National Cancer Institute?	15 (23%)

Question 6: Which resources have not been satisfactory?

Resource	Unsatisfactory
A Cancer Information Service (public cancer information offices that can be called toll-free)	2 (3%)
The International Cancer Research Data Base (a computerized listing of current cancer research)	6 (9%)
Printed materials from the National Cancer Institute	1 (1.5%)

* * * * *

Respondents liking all resources:	23 (36%)
Respondents disliking all resources:	2 (3%)
Non-Respondents:	24 (38%)

Question 7: What other sources do you go to for help with cancer-related projects?

Source	No. Respondents Who Use
Medical schools (hospitals)/ University faculty:	
• Mt. Sinai Hospital (NY)	4 (6%)
• Board members on staff of Sloan-Kettering	1 (1.5%)
• University groups	4 (6%)
• Johns Hopkins U (Md)	1 (1.5%)
• scientific community	1 (1.5%)
• Montefiore Hospital	1 (1.5%)
• Medical College of Wisconsin, Milwaukee	2 (3%)
• University of Alabama	1 (1.5%)
• George Washington University	1 (1.5%)
• Western Institute	1 (1.5%)
• Cal/OSHA Education Department	1 (1.5%)
• Yale Occupational Health Clinic	1 (1.5%)
• OSU Medical School	1 (1.5%)
• local hospitals	2 (3%)
• Harvard School of Public Health	1 (1.5%)

Question 7: (continued)

Source	Respondents Who Use
Government Agencies:	
• OSHA information	16 (25%)
• NIOSH information	23 (36%)
• USEPA	5 (8%)
• CPSC	1 (1.5%)
• Bureau of Labor Statistics	1 (1.5%)
Scientific Literature/Seminars	
• WIOES publications on asbestos	3 (5%)
• seminars	1 (1.5%)
• Harvard Medical Library	1 (1.5%)
• scientific literature	1 (1.5%)
Other unions/own medical staff	
• occupational medicine doctors	2 (3%)
• other New Directions Programs	2 (3%)
• in-house occupational cancer research scientists	1 (1.5%)
• other unions	1 (1.5%)

Question 7: (continued)

Source	Respondents Who Use
Voluntary agencies/International Agencies:	
• Alberta, Canada	1 (1.5%)
• International agencies	1 (1.5%)
• American Cancer Society, American Lung Association	5 (8%)
Other Agencies/Associations:	
• COSH groups	2 (3%)
• AAOHN	1 (1.5%)
• AIHA	1 (1.5%)
• AHF	1 (1.5%)
• WISHA	1 (1.5%)
• IARC	1 (1.5%)

* * * * *

Respondents who used no other sources:	5 (8%)
Non-Respondents:	8 (13%)

Question 8: Would you like more information about other (non-NCI) sources of assistance, such as programs dealing with noise, allergies, etc.

Yes: 50 (78%) No: 11 (17%) No Response: 3 (5%)

Breakdown of Suggestions for Assistance

Area of Interest	No. of Requests
General (including knowledge about occupational hazards, screening, health assessment, technology).	
• general information on occupational diseases including cancer	7 (11%)
• medical screening	1 (1.5%)
• training programs already developed for grain workers, welders, painters.	1 (1.5%)
• ergonomics	3 (5%)
Specific (including mention of metabolic or organic disorders associated with occupational hazards)	
• liver and kidney diseases	1 (1.5%)
• reproductive hazards	1 (1.5%)
• allergies	1 (1.5%)
• respiratory diseases	3 (5%)
• back strain	1 (1.5%)
• stress	1 (1.5%)

Question 8: (continued)

Area of Interest	No. of Requests
Categorical (including mention of specific substances or procedures which present occupational hazards).	
• noise	1 (1.5%)
• glass fiber	1 (1.5%)
• radiation, including sunlight	2 (3%)
• lead poisoning	1 (1.5%)
• heat/frost	1 (1.5%)
• vibration	1 (1.5%)
• sensitization reactions from chemical exposures	1 (1.5%)
• construction health hazards	1 (1.5%)
• toxic metals	1 (1.5%)
• dust	1 (1.5%)
• synthetic cutting oils related to skin and respiratory problems	1 (1.5%)
• pesticides	2 (3%)
• solvents	1 (1.5%)
• asbestos	1 (1.5%)

Question 9: Would you like information on how to teach people about cancer?

Yes: 50	No: 10	No Response: 3
(78%)	(16%)	(5%)

Suggestions for Programs	Frequency
• teaching dangers of asbestos and cancer; general occupational health risks	2 (3%)
• construction and cancer-causing substances	2 (3%)
• how committees on safety and health can monitor for cancer-causing substances	2 (3%)
• cancer detection	1 (1.5%)
• pros and cons of animal tests	1 (1.5%)
• what to tell doctors about occupational exposures	1 (1.5%)
• cancer and pesticides	1 (1.5%)
• cancer and solvents	1 (1.5%)
• worker attitudes towards cancer and risk-taking; towards their unions on health and safety issues	1 (1.5%)

Question 10: How can we help you to achieve the specific objectives of your New Directions Grant?

1. "What slides on the effects of asbestos are available if I wanted to use them in a lecture?"

2. "Go to construction jobs and test on job site, not in labs. What is printed is a lot of words and does not have a lot of meaning to the average worker. Get rid of some of those long medical words that are not listed in the dictionary."

3. "...supplying information as noted in Question 4."

4. "...methods of awareness and direction to obtain funds for continuation of our program."

5. "...provide information and publications concerning occupational cancer and identifying cancer-causing substances, synergism, detection." (7 requests)

6. "...In foundries there are other such visible [lung] problems, we have been unable to devote the time and effort needed to tackle the cancer issue fully. We are very interested in doing so. We are looking toward steps aimed at prevention. Any help NCI could give either through additional funding, or perhaps an internship arrangement for those interested in participating in working in occupational cancer from the labor perspective would be a tremendous help."

7. "(1) provide funding and technical support for development of special IBDAT/OSHA training modules in the synergistic effects of cigarette smoking and various paint trade substances, and techniques for worker detection of excess incidences of various cancers. Also, we would like to incorporate results of bioassays of paint trade substances into training and related efforts.

   (2) Provide computer services to assist in gathering cancer information about painters and provide a special painters' liaison at NCI."

Question 10: (continued)

8. "To develop more popular pamphlets which describe in detail specific cancer-causing substances in the workplace and how they can be controlled through engineering or administrative controls."

9. "Can NCI help the Barbers and Beauticians Union - one of our affiliates - to determine if any of the substances they work with are cancer-causing?"

10. "To jointly arrive at some proposed goals related to 'occupational cancer' and the best 'means' of presenting these objectives to our membership."

11. " NADC would be interested in any information which could be used to educate temporary employees/construction type workers on proper work practices around hazardous cancer-causing substances, e.g. asbestos, lead, PCBs."

12. "...down-playing smoking during occupational cancer training programs. Corporations seem to enjoy placing blame upon smokers rather than workplace carcinogens."

13. "(1) by assisting us in identifying local resources for teaching occupational cancer.

    (2) by helping us select informational materials for the workers and their families and professional educational materials, visual aids, and publications.

    (3) advising us on NCI's priorities and emphasis areas for educating workers in cancer prevention."

14. "by providing workshops for employees covering topics marked on page 1."

15. "(1) health professional education since we are not able to reach them effectively with more emphasis on job hazards instead of smoking.

    (2) grants for medical students to do summer projects with unions.

    (3) assemble and disseminate union and New Directions materials on job cancer"

Question 10: (continued)

16. "audiovisual materials." (3 requests)

17. "information needed on methodology of developing and using epidemiological data to document problems."

18. "provide names of competent resource people in Michigan who can present material in a clear and understandable manner to worker groups."

19. "provide training."

20. "send us information on various types of services offered. Do you consult? Also cost for your services."

21. "(1) identify methods to discover cancer hazards in the agricultural work place.

    (2) locate materials or develop materials to teach farm families about the hazards and how to reduce the potential for cancer caused by agricultural operations."

22. "(1) assistance in developing OSHA Library and Resource Center.

    (2) assistance in curriculum development for courses in occupational health.

    (3) current information on cancer rates in New Jersey since the publication of the Cancer Atlas.

    (4) recommendations of personnel to teach programs on occupational health cancer prevention, basic toxicology."

23. "We need help in sifting through the areas and materials and information that is relevant for construction workers, trade by trade."

24. "identify resource people in UTAH."

25. "materials for industrial OSH practitioners to use."

26. "help us establish the ins with data bases and researchers in agriculture or pesticides."

Question 10: (continued)

27. "(1) Workshops
(2) meeting of 1980 OSHA grantees

28. "bilingual (Spanish and English) OSH materials."

THE NCI NEW DIRECTIONS GRANTEES SURVEY

Your Name _____ **Your Title** _____

Your Organization _____

1. **Does your project conduct, or plan to conduct, activities aimed at the prevention or detection of occupational cancer?**

   yes _____ no _____

2. **If you answered "yes" to Question 1, please describe the activities below, or on an attached sheet, if necessary.**

   a. _____

   b. _____

   c. _____

   d. _____

   e. Other

3. **Below are some frequently discussed topics concerning occupational cancer. Please rate them 1 (most important) through 5 (least important) by circling the appropriate number to indicate your project's interest in teaching others about them:**

	(Circle one) Most important....least important				
What cancer is	1	2	3	4	5
How cancer is detected	1	2	3	4	5
How cancer may be caused in the workplace	1	2	3	4	5
How to identify cancer-causing substances in the workplace	1	2	3	4	5
How cancer is treated	1	2	3	4	5
The re-employment problems of the successfully treated cancer patient	1	2	3	4	5
How animal studies help us know a substance causes cancer	1	2	3	4	5
How two or more substances can interact to greatly increase the risk of cancer	1	2	3	4	5

3. (continued)

	Most important....least important				
How to organize a screening program	1	2	3	4	5
How to notify people who are at high risk	1	2	3	4	5
What workers' families should know about cancer risk	1	2	3	4	5
How smokers can reduce their cancer risk	1	2	3	4	5
What to tell a physician about occupational exposures	1	2	3	4	5
OSHA's National Cancer Policy	1	2	3	4	5
How to identify local resources	1	2	3	4	5

4. Has your organization made use of any of the following National Cancer Institute programs and services:

	yes	no	don't know	
a.	___	___	___	A Comprehensive Cancer Center (large cancer treatment and research institutions funded by NCI)
b.	___	___	___	A Cancer Information Service (public cancer information offices that can be called toll-free)
c.	___	___	___	The Cancer Information Clearinghouse (a centralized resource for educational materials and referral on many subjects relating to cancer)
d.	___	___	___	The International Cancer Research Data Base (a computerized listing of current cancer research)
e.	___	___	___	The Bioassay Program (a research program to test substances to determine whether they cause cancer)
f.	___	___	___	The Office of Cancer Communications/Health Message Testing Service (a service that pretests cancer education materials)
g.	___	___	___	Printed materials from the National Cancer Institute?

5. Which resources (a, b, c, d, e, f, g) would you like to know more about?

_____

6. Which resources have not been satisfactory? _____

7. What other sources do you go to for help with cancer-related projects?

_____

_____

_____

8. Would you like more information about other (non-NCI) sources of assistance, such as programs dealing with noise, allergies, etc. (please be as specific as possible).

yes _____ no _____ Programs _____

9. Would you like information on how to teach people about cancer?

yes _____ no _____

If you wish, describe your interest in more detail.

10. How can we help you to achieve the specific objectives of your New Directions grant?

Thank you for your help. Please return this form in the envelope provided to:

Mr. Robert Denniston
Special Assistant for Communications
Office of Cancer Communications
National Cancer Institute

We would appreciate receiving it by March 31, 1980.

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